

PLEASE PRINT OR TYPE

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First Name _____ Last Name _____

Company Affiliation _____

Job Title _____ Industry _____

Address _____

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Email _____ Phone _____

(All correspondence will be sent via email unless otherwise indicated)

In case of an emergency, please contact _____ Phone _____

All above information must be provided to process registration.

Please check all that apply:

- ☐ Check here if you have any special needs and the LIA will contact you.
☐ Check here if you do not want your name included in the published LAM® attendee mailing list.

Membership

Take advantage of discounted LIA membership prices and join today! Please visit www.lia.org/membership to see all the benefits of becoming a part of LIA. (This offer is good for new members only. Use discount code **LAM18**)

Individual Membership ☐ 1 year – ~~\$110~~ \$55 ☐ 2 year – ~~\$200~~ \$100

Registration

Includes admission to the Technical Sessions and Breaks. LAM is a co-located conference at the Lasers for Manufacturing Event® (LME®). Registration for LAM includes access to the LME Exhibit (\$50 value). Visit www.laserevent.org for more information.

Check member status: Member of ☐ LIA* ☐ AWS ☐ MPIF Membership # _____

*Membership must be valid through March 2018 to take advantage of member rates.

Payment Received by February 1		Payment Postmarked or Received by February 2 – Onsite
<input type="checkbox"/> Member\$425	<input type="checkbox"/> Retired LIA Member.....\$295	<input type="checkbox"/> Member\$450
<input type="checkbox"/> Non-Member\$450	<input type="checkbox"/> Full Time Student.....\$225†	<input type="checkbox"/> Non-Member\$475
<input type="checkbox"/> Cooperating Society\$425		

†Please note: Student registration will not be processed without a copy of your valid Student ID. Please include with registration form.
Students, Cooperating Societies & LIA Retired Members must register and pay in full by February 1. Special pricing is NOT available on-site.

Method of Payment

Payment or P.O. # must accompany registration form to be processed.
Confirmation letter will be sent within two weeks of receipt.

(Please include registrant's name on check or P.O.)

- ☐ Check or Money Order enclosed, payable to LIA in U.S. Funds, Drawn on a U.S. Bank
☐ Purchase Order enclosed ☐ Wire Transfer
☐ Visa ☐ MasterCard ☐ AMEX ☐ Discover

Purchase Order No./Credit Card No. _____

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*The card security code (CSC) is a 3- or 4-digit number (not part of the credit card number) that appears on the back of the credit card (Security Code appears on the front of American Express). Payment will not be processed without CSC code.

Name on Credit Card _____ Expiration Date ____/____/____ (MM/YYYY)

CC Holder Address _____

Authorized Signature _____ **Date** _____

Refund Policy: No refunds will be made on cancellations received after January 2. All requests for refunds must be made in writing and will not be processed until after the conference. There will be a \$75 processing fee for all refunds. For information on LIA cancellation, return policies and details on substitution terms visit www.lia.org/company/cancellation_policies.

Registration Disclaimers: Individuals attending LAM may be audiotaped, videotaped or photographed during the course of the event and by attending grant permission for their likeness and the content of their comments, if any, to be broadcast, webcast, published, or otherwise reported or recorded. Individuals attending LAM will receive future LAM mailings and by attending grant permission to opt-in to this mailing list.

Ethics Policy: By registering to attend LAM, individuals agree to abide by the LIA Ethics Policy located at www.lia.org/conferences/lam/ethics-policy.

Presented by:



**Laser Institute
of America**
Laser Applications and Safety

**50
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